

Application or Docket Number 10/532579

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CLAIMS AS FILED - PART I								SMALL EN	TITY	OR	OTHER		
			(Colu	umn 1)		(Column 2)	1			- OK	SMALL	ENIIIY	
U.S	3. NATIONAL	STAGE FEES						RATE	FEE		RATE	FEE	
BAS	SIC FEE		SMALL E	SMALL ENT. = \$ 150		GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE			(4) = \$	Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		other situations = \$ 100 / \$ 200		EXAM. FEE		1	EXAM. FEE	200	
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			m	minus 100 =		/ 50 =		X \$ 125 =		1	X \$ 250 =	1	
TOTAL CHARGEABLE CLAIMS			29	minus 20 =	. (7		X \$ 25 =		OR	X \$ 50 =	450	
INDEPENDENT CLAIMS			6	minus 3 =		3		X \$ 100 =		OR	X \$ 200 =	600	
MUL	TIPLE DEPEN	NDENT CLAIM PR	RESENT					+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	J .	TOTAL		OR	TOTAL	195	
		OL AIMO AO	ASSENDE	- DAD'						•		7,0	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)		SMALL E	NTITY	OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING		HIGH	EST	T		·	ADDI-	1		ADDI-	
	,	AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR-	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	~	
							-	TOTAL ADDIT. FEE		OR	TOTAL ADDIT.		
			•					· - -			, ,		
	Г	(Column 1)	1	(Colum		(Column 3)	r			ı r			
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Mińus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+ \$ 180 =		OR	+ \$ 360 =		
						· · · · · · · · · · · · · · · · · · ·	•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
								-			rec <u>.</u>		
							•						
*	If the entry in cold	umn 1 is lose than the	o ontre in colum	an 2 semile POH is		- 0							

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.